



Derbyshire County Council

ANNUAL REPORT

OF THE

COUNTY MEDICAL OFFICER OF HEALTH

For the Year 1971

A. H. SNAITH

M.D., F.R.C.Path., D.P.H.

COUNTY MEDICAL OFFICER OF HEALTH

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(December, 1971)

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ALDERMAN W. W. JOHNSON
(Vice-Chairman)

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(December, 1971)

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 J. WILLIAMSON

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Matlock,
Derbyshire. DE4 3AG.*

4th August, 1972

*To the Chairman and Members of the
Derbyshire County Council.*

This is the 82nd annual report of the health of the County of Derby. In 1974 a new health board will be responsible for all medical services in the new County. This is, therefore, a time of preparation and change.

In January, 1971, the new Social Services Committee took over responsibility for the mental health, day nursery and child minding, and home help services. Despite criticisms made elsewhere of these changes, in Derbyshire the transition has been relatively trouble free for patients and for doctors. An excellent working relationship has been established with the Director of Social Services and the staffs of the health and social services departments readily exchange advice. There is little doubt that the foundations of co-operation which have been laid will pay handsome dividends in subsequent years when the health and local government authorities are separated.

In June, 1971, Miss P. L. Simon took up her appointment as Director of Nursing Services. Before coming to Derbyshire Miss Simon had a distinguished career as Deputy County Nursing Officer of Hampshire, and in Edinburgh where she was Senior Assistant Superintendent of the Home Nursing Service and Central Training School for District Nurses in Scotland. In the autumn of the year the Department of Health and Social Security offered to send their advisory team on nursing management to Derbyshire and in consultation with them a new nursing management structure was devised and in due course implemented. Two divisional nursing officers were appointed, one for the north and one for the south of the county, with major responsibilities for planning nursing services and for training staff. The county was divided into four areas and in each an area nursing officer was appointed with an office in the locality. All hospital services and general practitioners were asked to contact the area nursing officer about community nursing matters and there is no doubt that this has been of the greatest advantage to the people working in the field.

A scheme of training courses for nursing staff has been instituted at the Darley Dale Centre. In-service district nurse training courses received the approval of the Department of Health and Social Security. Two courses will be held yearly, each with 20 places, and will include students from nearby authorities. Also a practical work instructor course, tutored by the Principal Nursing Officer of the Queen's Institute of District Nursing, was held at the Centre in April, 1972; a further course is planned next year.

Considerable work has also been undertaken on planning attachment schemes with the object of creating medical and nursing teams throughout the county based upon general practitioners' practices. A number of innovations have been made in nursing care, notably the introduction of a Marie Curie scheme which provides for home nursing for cancer patients over and above what the department can provide. This is of particular value for terminal cases in which continuous nursing is sometimes required to give exhausted or distressed relatives some relief.

The appointment of a Chief Chiropodist was a smaller development of the same kind. Mr. B. D. Blank, who was formerly Chief Chiropodist in Salford County Borough and Lecturer in Chiropody at the Salford College of Technology, took up his appointment in November, 1971. It is important to have a senior chiropodist to organise the chiropody service, which is always over-extended, so as to increase the efficiency and impact made by a staff which is necessarily largely composed of part-time chiropodists chiefly engaged in private practice. A number of innovations in the chiropody service have been made including the introduction of an appliance laboratory.

In 1971 the County Council's scheme for free family planning was introduced. Arrangements were made with the Family Planning Association to provide a completely free service to any Derbyshire resident on the recommendation (and without further enquiry) of any doctor, nurse or social worker, including any member of the staff of the F.P.A. After a slow start this service has grown steadily and at the time of writing is absorbing the full financial provision made for it by the Committee. Steps are now being taken to provide additional family planning facilities, using the department's own staff, as well as F.P.A. staff, at every purpose-built clinic in Derbyshire. This requires a considerable staff training programme, but it is hoped to achieve the objective in due course. There is little doubt that a fully free service for family planning for everyone is likely to be introduced into this country fairly soon, but such a service must at least be available to anyone for whom a recommendation is made by a doctor, nurse or social worker.

Considerable work has been done on health centres. There have been many discussions with general practitioners all over the county and the present position is that some 18 are now at various stages of planning or development.

At their meeting in May the Health Committee agreed a scheme for the provision of a developmental paediatric service for all pre-school children in the county. Design work in this was very considerable and proceeded steadily throughout the year with a view to implementation in 1972. (At the time of writing this report the system is operational and working well so far).

The computer is employed to organise the appointments in this scheme and the opportunity was taken to design at the same time a computer scheme for immunisations, both for the committee's own clinics and for general practitioners.

An important problem in 1971 was the provision of appropriate facilities in patients own homes for renal dialysis. In the past alterations to patients homes—which may be very expensive—have sometimes been difficult to carry out and there have been delays. The time factor is important in handling these cases and after discussion of the subject with renal consultants at the regional hospital board, the Committee agreed a scheme, devised in collaboration with officers of other departments, to provide portakabins whenever practicable. These give first class accommodation and since a portakabin can always be kept by the County Architect “on the shelf” it is possible to meet the needs of almost all cases immediately.

Attention is drawn to the fact that the number of new cases of tuberculosis, both respiratory and non-respiratory, show a slight increase over the previous year, contrary to the generally downward trend since 1914 when figures were first recorded. It is too early to draw any conclusion from the small number of cases involved.

I should like to express my appreciation to Alderman Mrs. J. B. Hartley, the Chairman of the Health Committee, for her support throughout the year, and to the staff for their enthusiastic co-operation in all the changes that are taking place in the organisation of community health services.

A. H. SNAITH,

County Medical Officer of Health.

PART I—GENERAL STATISTICS

Area, Population and Rateable Value

The administrative county of Derby comprises twenty-nine sanitary districts, four of which are municipal boroughs, sixteen urban districts and nine rural districts.

The county has an area of 619,002 acres, 98,074 in municipal boroughs and urban districts and 520,928 in rural districts.

The population of the administrative county as estimated by the Registrar-General at the middle of 1971 was as follows:-

Municipal Boroughs	..	..	148,410
Urban Districts	..	..	240,270
Rural Districts	..	..	276,950
Total administrative county		..	665,630

The rateable value on 1st April, 1971, was £24,303,298, and the product of a 1p rate, £231,964.

Vital Statistics

		<i>Males</i>	<i>Females</i>	<i>Total</i>
Live births—legitimate	..	5,006	4,849	9,855
—illegitimate	..	392	353	745
Total	..	5,398	5,202	10,600

		<i>Derbyshire</i>	<i>Rates for England & Wales</i>
Live birth rate per 1,000 population	..	15.9	16.0
Illegitimate live births per cent of total live births	..	7	8
Stillbirths—Number	..	129	
—Rate per 1,000 total live and still births	..	12	12
Total live- and still-births	..	10,729	
Infant deaths (deaths under one year)	..	204	
Infant mortality rates—			
Total infant deaths per 1,000 total live-births	..	19	18
Legitimate infant deaths per 1,000 legitimate live-births	..	18	17
Illegitimate infant deaths per 1,000 illegitimate live-births	..	38	24

	<i>Derbyshire</i>	<i>Rates for England & Wales</i>
Neo-natal mortality rate (deaths under four weeks per 1,000 total live-births) ..	13	12
Early neo-natal mortality rate (deaths under one week per 1,000 total live-births) ..	11	10
Perinatal mortality rate (still-births and deaths under one week combined per 1,000 total live- and still-births)	23	22
Maternal mortality (including abortion)—		
Number of deaths	3	
Rate per 1,000 total live- and still-births	0.28	0.17
Number of deaths from all causes	7,902	
Death rate per 1,000 of the estimated population	12.5	11.6
Deaths from cancer	1,527	
Death rate from cancer	2.16	2.39

Derbyshire compared with England and Wales

Year		Birth Rate per 1,000 population	Death Rate per 1,000 population	Infant Mortality Rate per 1,000 live births	Neonatal Mortality Rate per 1,000 live births	Stillbirths per 1,000 total live and still births	Maternal Mortality Rate per 1,000 total live and still births
1891	DERBYSHIRE	35.1	18.9	142	†	†	†
	England & Wales	31.4	20.2	149			
1900	DERBYSHIRE	32.18	16.65	152	†	†	†
	England & Wales	28.9	18.3	154			
1910	DERBYSHIRE	28.9	12.6	113	†	†	†
	England & Wales	24.8	13.4	106			
1920	DERBYSHIRE	27.31	11.67	83.16	†	†	†
	England & Wales	25.4	12.4	80.0			
1930	DERBYSHIRE	16.92	10.15	61.4	†	†	†
	England & Wales	16.3	11.4	60.0			
1940	DERBYSHIRE	15.54	12.24	55.43	†	†	†
	England & Wales	14.6	14.3	55.0			
1950	DERBYSHIRE	15.78	11.3	30.19	†	†	†
	England & Wales	15.8	11.6	29.8			
1960	DERBYSHIRE	16.21	12.11	19.74	13.54	22.64	0.33
	England & Wales	17.1	11.5	21.9	15.6	19.8	0.4
1965	DERBYSHIRE	17.31	11.68	17.20	11.25	15.88	0.07
	England & Wales	18.1	11.5	19.0	13.0	15.8	0.3
1969	DERBYSHIRE	15.9	12.5	18	11	14	0.19
	England & Wales	16.3	11.9	18	12	13.2	0.2
1970	DERBYSHIRE	15.6	12.5	17	11	13	0.19
	England & Wales	16.0	11.7	18	12	13	0.18
1971	DERBYSHIRE	15.9	12.5	19	13	12	0.28
	England & Wales	16.0	11.6	18	12	12	0.17

Since 1954 the rates for the administrative county have been adjusted for age and sex and are, therefore, comparable with those for England and Wales.

† Figures not available.

Information relating to Sanitary Districts —

SANITARY DISTRICTS	MEDICAL OFFICER OF HEALTH	Areas in Acres (Land and Water)
(URBAN)		
ALFRETON	P. Weyman, L.R.C.P., L.R.C.S., L.R.F.P. & S., D.P.H.	5,172
ASHBOURNE	W. J. Morrissey, M.B., B.Ch., B.A.O., D.P.H.	1,070
BAKEWELL	Vacant	3,061
BELPER	W. J. Morrissey, M.B., B.Ch., B.A.O., D.P.H.	4,293
BOLSOVER	M. J. Cash, M.R.C.S., L.R.C.P., D.P.H.	4,528
BUXTON (Borough) ..	H. E. Nutten, M.B., Ch.B., D.P.H. ..	6,338
CHESTERFIELD (Borough) ..	H. Bailey, M.B., Ch.B., D.P.H. ..	8,477
CLAY CROSS	D. P. Adams, M.B., Ch.B., D.P.H. ..	2,348
DRONFIELD	D. P. Adams, M.B., Ch.B., D.P.H. ..	3,457
GLOSSOP (Borough) ..	Vacant	3,323
HEANOR	P. Weyman, L.R.C.P., L.R.C.S., L.R.F.P. & S., D.P.H.	4,420
ILKESTON (Borough) ..	P. Weyman, L.R.C.P., L.R.C.S., L.R.F.P. & S., D.P.H.	3,018
LONG EATON	C. G. Woolgrove, M.B., Ch.B., D.P.H.	3,559
MATLOCK	Vacant	16,598
NEW MILLS	Vacant	5,244
RIPLEY	P. Weyman, L.R.C.P., L.R.C.S., L.R.F.P. & S., D.P.H.	5,414
STAVELEY	D. P. Adams, M.B., Ch.B., D.P.H. ..	6,504
SWADLINCOTE	A. F. Crowley, M.B., B.Ch., B.A.O., D.R.C.O.G., D.P.H.	3,760
WHALEY BRIDGE	H. E. Nutten, M.B., Ch.B., D.P.H. ..	3,479
WIRKSWORTH	W. J. Morrissey, M.B., B.Ch., B.A.O., D.P.H.	4,011
TOTALS OF URBAN DISTRICTS ..		98,074
(RURAL)		
ASHBOURNE	W. J. Morrissey, M.B., B.Ch., B.A.O., D.P.H.	86,188
BAKEWELL	Vacant	85,644
BELPER	W. J. Morrissey, M.B., B.Ch., B.A.O., D.P.H.	46,277
BLACKWELL	M. J. Cash, M.R.C.S., L.R.C.P., D.P.H.	21,666
CHAPEL-EN-LE-FRITH	H. E. Nutten, M.B., Ch.B., D.P.H. ..	103,391
CHESTERFIELD	D. P. Adams, M.B., Ch.B., D.P.H. ..	63,908
CLOWNE	M. J. Cash, M.R.C.S., L.R.C.P., D.P.H.	13,424
REPTON	A. F. Crowley, M.B., B.Ch., B.A.O., D.R.C.O.G., D.P.H.	64,237
S. E. DERBYSHIRE	C. G. Woolgrove, M.B., Ch.B., D.P.H.	36,193
TOTALS OF RURAL DISTRICTS ..		520,928
TOTALS OF URBAN DISTRICTS ..		98,074
TOTALS OF WHOLE COUNTY ..		619,002

Year ended 31st December, 1971.

POPULATION		Births (Live)	Deaths	Rate per 1,000 of Estimated Population*		Infant Death Rate per 1,000 Births	Comparability Factors	
Census 1961	Esti- mated Mid- 1971			Birth Rate	Death Rate		for Births	for Deaths
22,999	21,640	337	260	16.5	13.6	21	1.06	1.13
5,680	5,610	94	94	18.5	11.8	11	1.10	0.70
4,170	4,320	38	69	9.5	9.3	53	1.08	0.58
16,360	16,500	260	263	16.7	11.8	19	1.06	0.74
11,770	10,940	168	125	14.6	14.3	18	0.95	1.25
20,100	19,880	312	281	16.5	12.4	19	1.05	0.88
70,420	69,960	1,079	879	15.7	12.7	21	1.02	1.01
9,880	9,720	168	108	18.2	13.0	12	1.05	1.17
15,880	18,070	402	118	16.9	9.3	15	0.76	1.43
21,830	24,360	444	312	19.8	11.4	27	1.09	0.89
24,470	24,300	417	286	18.1	13.6	24	1.05	1.15
35,400	34,210	594	402	17.6	14.4	25	1.01	1.22
33,170	33,630	604	355	17.8	11.7	8	0.99	1.10
20,240	20,180	306	190	15.4	9.9	10	1.01	1.05
8,880	9,140	172	128	20.1	13.2	29	1.07	0.94
17,910	17,880	243	226	14.6	13.4	12	1.07	1.06
18,480	17,670	287	247	16.4	17.2	24	1.01	1.23
20,130	20,240	343	282	18.1	15.2	15	1.07	1.09
5,390	5,290	70	60	15.3	11.3	14	1.16	1.00
5,040	5,140	75	53	14.5	11.7	13	0.99	1.14
387,640	388,680	6,413	4,738	16.8	12.7	19	1.02	1.04
11,890	11,860	179	118	16.9	10.8	22	1.12	1.09
18,760	18,650	205	255	12.0	11.9	24	1.09	0.87
23,770	24,810	342	268	14.8	10.8	18	1.07	1.00
44,240	42,470	682	471	16.1	13.5	23	1.00	1.22
18,350	18,700	269	250	16.0	11.8	22	1.11	0.88
73,700	69,090	1,066	773	14.5	14.4	18	0.94	1.29
19,730	18,920	314	213	16.9	12.2	32	1.02	1.08
33,240	32,300	487	380	16.0	10.6	18	1.06	0.90
39,010	40,150	643	436	15.8	10.8	11	0.99	0.99
282,690	276,950	4,187	3,164	15.3	12.2	20	1.01	1.07
387,640	388,680	6,413	4,738	16.8	12.7	19	1.02	1.04
670,330	665,630	10,600	7,902	16.2	12.5	19	1.02	1.05

and age of population, etc.

Table of deaths during the year 1971 in each of the Sanitary Districts, classified according to diseases.

CAUSES OF DEATH	URBAN DISTRICTS		RURAL DISTRICTS		GRAND TOTALS
	ALFRETON	ASHBOURN	BAKEWELL	BLACKWELL	
Cholera
Typhoid Fever
Bacillary dysentery and amoebiasis
Enteritis and other diarrhoeal diseases
Tuberculosis of respiratory system
Late effects of Resp. T.B
Other tuberculosis
Plague
Diphtheria
Whooping Cough
Streptococcal sore throat and scarlet fever
Meningococcal infection
Acute poliomyelitis
Smallpox
Measles
Typhus and other rickettsioses
Malaria
Syphilis and its sequelae
All other infective and parasitic diseases
Malignant neoplasm—buccal cavity and pharynx
Malignant neoplasm—Oesophagus
Malignant neoplasm—Stomach
Malignant neoplasm—Intestine
Malignant neoplasm—Larynx
Malignant neoplasm—Lung, bronchus
Malignant neoplasm—Breast
Malignant neoplasm—Uterus
Malignant neoplasm—Prostate
Leukaemia
Other malignant neoplasms, including neoplasm of lymphatic and haematopoietic tissue

PART II—CARE OF MOTHERS AND YOUNG CHILDREN

Ante-natal care

During the year, 721 sessions were held at 14 of the County Council's main clinics. All were conducted by County Council medical staff, except one which was attended by a consultant obstetrician provided by the Regional Hospital Board. One or more of the authority's midwives and a health visitor are present at each clinic. The number of women who attended for ante-natal examinations was 992, and 100 attended for post-natal examination.

A routine medical examination is carried out at the patient's first visit to the clinic and any abnormalities detected are referred to the patient's general medical practitioner, or, with his approval, to an appropriate hospital consultant. Arrangements are made for the collection of blood from all patients, so that A.B.O. group typing and Rh. typing, as well as tests for syphilis, may be performed. Haemoglobin estimations are also made. Ferrous fumerate and ferrous gluconate tablets are available at the clinics, and patients not responding to these are referred to their own doctor for alternative treatment. Midwives are asked to visit any patient requiring close observation during the interval between her attendances at the clinic. All these facilities are available to both married and unmarried mothers.

Ante-natal records

Each patient attending the clinic receives a standard co-operation card on which is recorded a copy of the findings at each examination. The patient keeps this card in an envelope together with particulars of her blood group. She is instructed to bring this envelope with her when attending for ante-natal examination whether at the general practitioner's surgery or at hospital.

Supervision

The importance of regular ante-natal care is impressed on all patients attending the ante-natal clinics. They are asked to attend every month up to the 30th week, every fortnight from 30th-36th week and every week, where possible, from the 36th-40th week. It is, however, difficult to evolve a "pattern of supervision" as many patients transfer to hospital ante-natal care if and when their application for a hospital bed is accepted.

Mothercraft and relaxation classes

Mothercraft and relaxation classes are held as needed at all the main clinics. Usually they are conducted by the health visitor for the area, and one or more midwives who have received special training in the technique of correct breathing, exercise and relaxation in pregnancy and childbirth.

Number of women who attended during 1971 ..	2,445
Total number of attendances	8,850

Arrangements for selecting women whose confinement in hospital is recommended on medical or social grounds

The provision of hospital accommodation for maternity cases is the responsibility of Regional Hospital Boards. To facilitate the administrative arrangements concerning the large number of patients desiring hospital or maternity home accommodation, bed bureaux have been set up at Chesterfield and Derby by the Sheffield Regional Hospital Board. Forms of application for admission are available at the authority's ante-natal clinics, and these are passed to the appropriate bed bureau. Kings Mill Hospital, Mansfield, has also agreed to allocate six beds per month to patients living on the eastern fringe of the county.

Where admission to a hospital bed is recommended on medical grounds, this is usually sufficient to ensure that a bed is made available. In most cases, however, applications are based on social need, and such cases are referred to this authority for a report by a domiciliary midwife on the home circumstances.

Child health clinics

During 1971, one new child health clinic was opened, making a total of 106. The number of sessions and attendances at the child health clinics during 1971 are set out below:-

Half-day sessions	..	..	..	..	4,284
Number of children who attended during the year and were born in:					
1971	..	..	..	..	8,085
1970	..	..	..	..	6,793
1966-1969	..	..	..	..	6,749
Total number of children who attended during the year					21,627

Care of premature infants

Local health authorities are required by the Department of Health and Social Security to provide statistics about premature babies (i.e. those weighing $5\frac{1}{2}$ lbs. or less at birth). They relate to hospital births as well as domiciliary and nursing home births, thus constituting a complete record of the occurrence of each premature birth (live and still) and of the survival of premature infants in the area of the local health authority. The figures for 1971 are as follows:-

Number of premature live births notified (as adjusted by transfer notifications):-				
(a) In hospital	..	..	..	487
(b) At home or in a nursing home	..	..		20
			Total	507

Number of premature still-births notified (as adjusted by transfer notifications):-		
(a) In hospital	..	62
(b) At home or in a nursing home	..	3
Total	..	65

Of the 487 premature babies who were born in hospital, 54 died within twenty-four hours of birth and 417 survived twenty-eight days. Of the 20 born at home or in a nursing home, 7 transferred to hospital on or before the twenty-eighth day; one died within twenty-four hours of birth, and 19 survived twenty-eight days.

Congenital abnormalities

During the year, 109 children have been notified to the Department of Health and Social Security as having congenital abnormalities. Of these 15 were still-born and 14 died in the first week of life. Classifying each case according to the major deformity present they fell into the following categories:-

Central nervous system ..	39
Eye, ear ..	1
Alimentary system ..	14
Heart and great vessels ..	3
Respiratory system ..	-
Uro-genital system ..	9
Limbs ..	33
Other skeletal ..	2
Other systems ..	4
Other malformations ..	4
Total ..	109

Register of handicapped children

Records are kept of handicapped children, as well as those who are in groups thought to be "at risk" of developing handicapping conditions, including those discovered to have congenital abnormalities. During the year, 91 children born in 1971 were placed on the handicapped register.

Dental care of expectant and nursing mothers and pre-school children

Mr. H. E. Gray, the Chief Dental Officer, has provided the following report:-

"The work done for expectant mothers was approximately the same as in 1970, but there was an appreciable increase in that for the pre-school children. A better staffing position enabled the service to be expanded in some areas and re-expanded in others previously unstaffed.

The demands varied from time to time and treatment was integrated with that for the school children. This avoided a waste of time as separate treatment sessions could not always have been fully booked. The time occupied by this work was the equivalent of 130 half day sessions.

Forty-two expectant mothers were examined and 40 found to require treatment. Thirty-eight were treated and required a total of 96 visits. Treatment was mainly conservative and special attention was given to gum conditions associated with pregnancy. Extractions were minimal and only one patient was fitted with a denture.

Nine hundred and forty pre-school children were inspected. Except for those seen at the day nurseries, all the others were inspected at the clinics following requests for appointments by parents or referred by family doctors and health visitors.

Treatment was required by 556 and 527 made 950 attendances for the necessary attention. Conservative treatment predominated, 900 fillings were done, about double the number of the previous year. Extraction work accounted for the removal of 360 teeth and with a few exceptions, this was done under general anaesthetic, 121 general anaesthetics being administered.

Of the total visits made, only 49 were recorded as being emergency.

Dental health education continued as in past years. The parents were seen and their children's dental welfare discussed. This has been found to be one of the most effective ways of encouraging home care and regular check-ups, when early defects can be detected and easily treated with the minimum of discomfort.

Selections of literature were issued for use at home and children received gift packs of a tooth brush, tooth paste and a coloured beaker.

The health visitors co-operated with advice, talks and films at the infant welfare, ante-natal and relaxation clinics."

Welfare foods

The County Council has for many years supplied a limited number of proprietary preparations at ante-natal and child health clinics at approximately cost price. At the ante-natal clinics simple preparations of iron in tablet form (ferrous fumerate and ferrous gluconate) are prescribed by the medical staff in suitable cases.

During the year a number of changes occurred in the welfare foods service. National Dried Milk, vitamin A & D tablets, cod-liver-oil and orange juice continued to be distributed by the authority at 103 clinics, 54 local stores and 2 other centres, with the addition of a new product, Children's Vitamin Drops (vitamins A D and C) which became available on the 4th April. From 10th April, National Dried Milk ceased to be available at the cheap rate of 11½p, issues from that date being at either full cost (20p), or free. Cod-liver-oil ceased to be supplied by the Department of Health and Social Security as a welfare food after 30th April.

	<i>National Dried Milk (Packets)</i>	<i>Cod Liver Oil (Bottles)</i>	<i>Vitamin Drops (Bottles)</i>	<i>Vitamin A. & D. (Packets)</i>	<i>Orange Juice (Bottles)</i>
Issued against coupons:					
(a) for cash ..	2,669	—	—	—	—
(b) free ..	3,105	810	1,624	307	8,076
Issued to:					
N.H.S. hospital	375	—	—	—	63
Day nurseries ..	8	72	180	—	510
Issued at full price	22,497	4,327	8,526	10,523	171,295
Totals	28,654	5,209	10,330	10,830	179,944

Family planning clinics

The National Health Service (Family Planning) Act, 1967, confers on local health authorities a general power, with the approval of the Minister of Health (and, when the Minister directs, imposes a duty on them) to make arrangements for giving advice on contraception, the medical examination of persons seeking such advice and the supply (by prescription or directly) of contraceptive substances and appliances. Authorities may provide, or arrange for other bodies to provide, such advice and supplies for any persons who need them on social or medical grounds, i.e., for women likely to suffer detriment to their health as a result of pregnancy.

The authority has continued to make its clinics available to the Family Planning Association without charge, at agreed times, for the purpose of conducting family planning sessions.

With effect from April, 1971, the County Council entered into an arrangement with the Family Planning Association under which women whose health might be expected to suffer because of increased mental, physical or social burdens placed upon them by pregnancy may obtain free family planning advice and supplies. The intention is to provide a professionally based service so that medical or professional social workers are able in appropriate cases to arrange family planning services free, and without difficulty. The scheme, therefore, provides facilities for doctors, County Council health visitors, midwives, home nurses and social workers and the Family Planning Association's professional staff to refer medical or social cases to any of the 17 family planning clinics which are available, or for a domiciliary service. The Association's own arrangements under which a remission of charges may be made (in respect of both fees and supplies) on purely financial grounds continued. No distinction is made between the married and the unmarried over the age of 16 years.

From the inception of the scheme in April to the end of the year, 425 women were referred for free family planning services.

Towards the end of the year the Health Committee gave consideration to the possible expansion of the service. Having regard to the fact that family planning sessions were available at only half of the authority's 24 clinics or health centres, it was considered that the most useful extension to the facilities would be to provide a service at some, if not all, of the clinics where such sessions are not available. As it was difficult for the Association to provide extra clinics because of shortage of staff, it was decided that during 1972/73 the health department should establish family planning sessions where it is reasonable for their own medical and nursing staff to undertake the work—these would supplement those of the Family Planning Association, which would not in any way withdraw from the Derbyshire service.

PART III—NURSING SERVICES

Management structure of the county nursing service

During 1970, consideration was given to the "Mayston Committee" Report of the Working Party on Management Structure in the Local Authority Nursing Services. The Report foresaw that demands on the community nursing services were likely to increase, and stressed the importance of good management to ensure patient care, based on sound nursing policies and the effective deployment of nursing staff. The authority approved the reorganisation of their nursing services on the basis of a geographical pattern of management, and the appointment of a chief nursing officer to be responsible for the direction of all the nursing staff. Miss P. L. Simon was appointed and took up duty in this post on 1st June, 1971.

Subsequently arrangements were made for the Department of Health and Social Security advisory team on local authority nursing services to visit Derbyshire, and having regard to their advice the management structure of the nursing services was further considered. It was decided that they should be reorganised on the basis of a geographical pattern of management, with the division of the services into four areas, and an establishment of a Director of Nursing Services (formerly designated chief nursing officer); two Divisional Nursing Officers (on the headquarters staff); and four Area Nursing Officers. As already mentioned, the post of Director of Nursing Services was filled from 1st June, 1971. The remaining appointments were made with effect from April 1972 and at the time of drafting this report the nursing management structure is as follows:-

Director of Nursing Services

Miss P. L. Simon, S.R.N., R.M.N., Q.N., S.C.M., H.V.

Divisional Nursing Officers

Miss M. Addy, S.R.N., S.C.M., H.V., Q.N. (for north of the county)

Miss P. M. Scarborough, S.R.N., S.C.M., H.V., Q.N. (for south of the county)

Area Nursing Officers

Based on

Miss V. Cooper, S.R.N., S.C.M., H.V., Q.N. Matlock clinic

Miss J. McLeish, S.R.N., S.C.M., H.V. Long Eaton clinic

Miss P. Richards, S.R.N., S.C.M., Q.N. Derby clinic

Miss S. K. Williams, S.R.N., S.C.M., H.V. Buxton clinic

Chesterfield Borough (delegate health authority)

Area Nursing Officer:

Miss M. Hattley, S.R.N., H.V. Town Hall, Chesterfield

Supervisor of Midwives:

Mrs. M. Rhodes, S.R.N., S.C.M. Town Hall, Chesterfield

Training of Nursing Staff

In the past, the authority's nursing staff have been seconded to nearby local authorities for training for the national certificate in district nursing. With the creation of the new nursing management structure described above, it was decided to establish a Derbyshire County Council training scheme for district nurses, making use of the facilities available at the authority's training premises at Darley Dale. In addition to training for the national certificate it is intended to arrange advanced in-service training, including practical work instructors' courses, and to co-operate as needed in providing community nursing experience for hospital trainee nurses. These arrangements were programmed to commence in 1972.

Co-operation with voluntary bodies

Marie Curie Memorial Foundation for Cancer Relief

The Welfare schemes of this Foundation provide relief for patients suffering from cancer. Assistance can be obtained in two ways: (a) by applying for admission of a patient to one of the Foundation's residential homes; or (b) by seeking assistance through its area welfare grants scheme, which provides for certain needs of patients who are being nursed at home, and covers the provision of a day and night nursing service for patients suffering from terminal cancer in their own homes. During the year the Foundation was approached and agreed to the implementation of its welfare schemes in Derbyshire, to be administered in conjunction with the county's nursing services. A grant was made to the Foundation.

British Red Cross Society

St. John Ambulance Brigade

Arrangements were made during the year with the British Red Cross Society for members of their Voluntary Aid Detachment, who have undertaken the BRCS Home Nursing Course, to accompany and assist the County Council's Home Nurses on their visits to patients in the community. Similar arrangements were made with the St. John Ambulance Brigade in respect of their members who hold the higher proficiency level certificate in home nursing. Essentially members will undertake, under the direction of the Home Nurses, unskilled nursing duties, particularly with elderly people, such as bed or chair bathing, assisting with bathing in the bathroom, changing of bed linen, changing of personal clothing, nail cutting and hair washing. Generally the Brigade's members will assist where the Society's personnel are not available. The arrangement should prove of material benefit, as it will consolidate the training and maintain the interest of members in the nursing field, and relieve home nurses of unskilled work and result in a better service to the patients.

Home nursing

The number of patients treated and visits paid by the Home Nurses are given below:-

Total number of persons nursed during the year	11,346
Number under five years of age	262
Number of persons aged 65 years and over ..	6,218

At the end of the year there were 134 Home Nurses and 6 Home Nurse-Midwives on the staff.

Nursing aids continued to be issued on loan. These include mattresses, beds, wheelchairs, commodes, urinals, crutches, walking sticks and air rings. Ripple beds, for the prevention of bed sores, are frequently lent on a short-term basis in appropriate cases. The number of incontinence pads, pants and pant interliners supplied to patients has continued to increase. In 1961, when they were first supplied, some 3,900 incontinence pads were provided. Last year the number was over 160,000, and during 1971 just over 213,000 were supplied.

Midwifery

The local supervision of midwives practising in the administrative county is the responsibility of the County Council. At the end of 1971 there were 192 midwives on the county roll—109 working in hospitals or maternity homes; 76 employed by the County Council as domiciliary midwives; 6 home nurse/midwives employed by this authority; and one in private practice.

Domiciliary midwifery

The authority provides a domiciliary midwifery service throughout the administrative county. During the year the Council's midwives attended 1,730 home confinements (compared with 1,903 in the previous year and 2,263 in 1969). The number of babies delivered in hospitals and other institutions, but discharged and attended by domiciliary midwives before the tenth day, was 8,317 (compared with 6,589 last year and 5,549 in 1969). The domiciliary confinements comprised just under 19% of the notified births, a drop of about 1% compared with the previous year.

Training of pupil midwives

Arrangements have been made with the Sheffield Regional Hospital Board for the training of pupil midwives in the Chesterfield area. These provide for the Board paying the pupil midwives' salaries as well (if necessary) as a weekly sum to the midwife for providing board and lodging for each pupil, while the County Council pays £45 per annum to the Midwifery Teacher.

Health visiting

Details are given below of the types of cases visited by Health Visitors during the year:-

<i>Type of case</i>	<i>No. of cases visited</i>
Children born in 1971	10,146
" " 1970	8,228
" " 1966/69	15,424
Total	33,798
Persons aged 65 years and over	6,626 (3,287)
Mentally disordered persons	199 (111)
Persons discharged from hospital (other than maternity or mental cases)	673 (511)
Tuberculous households visited	259
Homes visited on account of other infectious illnesses	190
Other cases	8,750

(Note: The figures in brackets are the number of persons visited at the special request of a general medical practitioner or hospital).

At the end of the year there were 87 whole-time and 6 part-time Health Visitors on the staff; 9 student health visitors sponsored by the authority; and 5 school nurses.

Attachment of nursing staff to general medical practitioners

At 30th September, 1971, 36 health visitors were working within attachment schemes and 26 partly within attachment schemes; 77 home nurses were partly attached. The number of general medical practitioners with health visitors wholly or partly attached was 153, and 170 had partially attached home nurses.

PART IV—PREVENTION OF ILLNESS, CARE AND AFTER CARE

Health education

For a number of years a continuous and expanding programme of health education has been provided in Derbyshire. From the outset the importance of involving health department field workers, teachers etc. was recognised, and a vital function of the health education service would be to seek out those with an aptitude for such work, provide them with any necessary training in the techniques of health education, meet their requirements for teaching aids of all kinds, and to give them support and encouragement in every way.

The full measure of the success of work in previous years became obvious in 1971, with demands on the service approaching capacity. The following table shows the increase in film shows and talks alone arranged over the last five years:

1967	1968	1969	1970	1971
4,973	6,920	7,846	9,273	12,207

Many valuable activities, not translatable into statistics, but forming a regular and basic part of the health educator's work show similar trends. Techniques, too, become increasingly sophisticated, and early in 1971 it was apparent that the way in which various services were provided would need close examination to avoid any deterioration in standard.

One important result of this was the establishment of a working party of officers of the education and health departments to consider means by which health education in schools should be further developed, and it is anticipated that a new programme for schools will be introduced in the autumn of 1972.

The month by month programme for clinics was continued for the year, the subjects selected being:

January	Measles
February	Smoking and lung cancer
March	Nutrition
April	Care of the feet
May	Dental health
June	Food hygiene
July	} Holiday safety
August	
September	Care of the elderly
October	Fireworks safety
November	Vaccination and immunisation
December	Christmas safety

As far as possible sets of appropriate posters and leaflets were distributed. On occasion, however, no suitable posters were available for purchase, and demands on time and personnel were such that it was not always possible to have our own designs printed locally. An ever increasing problem is to find sources of these valuable aids to publicity as more and more national organisations cease to produce them.

Smoking and health continues to be one of the most important of the health education subjects. In terms of mortality deaths attributable to cigarette smoking account for more than those caused in accidents on the roads, in the home, in industry and air and sea transport combined, but there is still a long way to go in helping the public to realise that the facts are clear. What may prove to be the most important step in this direction was the establishment of an action committee on smoking and ill-health, composed of doctors from hospitals, general practice, industrial medicine and the public health sector, to give a lead to the profession in constantly keeping the health hazards of smoking before the public.

Displays based on the monthly health education programme were prepared by the health visitors in the clinics. A number of health visitors are now attached to general practices, and have in many cases been able to provide small displays for the surgeries. This has proved to be a useful new outlet, and it is hoped that this trend will continue to expand. Several exhibition stands and displays have been produced in the health education service workshop. A Home Safety Competition stand proved to be popular amongst the Home Safety Committees throughout the year, and special stands on a variety of subjects were prepared for exhibitions at Glossop (where the General Dental Council caravan was also manned for ten days), Long Eaton, Ilkeston, Derby and Buxton. A permanent display on Dental Health was arranged at the Children's Hospital, Derby. The stand was specially designed for this setting, which provides a valuable opportunity for the promotion of health education for children, though the subject must be chosen with care in such a location.

The fourteen Home Safety Committees continue to undertake their valuable work towards the prevention of home accidents. Over the past two or three years a gradual decline in the number of deaths attributable to accidents in and around the home appears in the statistics, and in a large part the members of the Home Safety Committees can take credit for this. To increase still further the effectiveness of their work the Derbyshire Home Safety Liason Committee, composed of representatives of the fourteen Committees and of the health education service, was formed, to co-ordinate home safety activities throughout the county. Committees greatly benefit from this closer contact with each other, and it is hoped that it will also provide a stimulus to those authorities in the county not having a Home Safety Committee to form one.

In-service training has tended to follow the pattern set in previous years, with new health visitors being trained in the use of

the many audio-visual aids available, and in the techniques of health education. During May, a series of sessions on health education in infant and junior schools was held for the health visiting staff, and the interchange of ideas on this subject proved to be most stimulating. As well as in-service training directly concerning the health education service a steadily growing demand has been apparent from other sections of the health department for the provision of audio-visual aids of all kinds for use in their own schemes.

The enormous growth of demands made on the health education service are apparent, and 1971 saw a further expansion in the work undertaken, increasing both the administrative and technical work. The health education service is essentially an out-going organisation, and care must be taken that the initiative is maintained.

Chiropody

During the year the establishment of 15 whole-time officers was amended by designating one post as Chief Chiropodist. This was filled by the appointment of Mr. B. D. Blank from 1st November

At the end of the year, 28 clinics were providing chiropody services. The staff comprised the Chief Chiropodist, five whole-time and 17 part-time chiropodists, equal altogether to approximately 11½ officers.

The following table indicates the treatment carried out during 1971:-

	Elderly		Physically handicapped		Expectant mothers		No. of clinic sessions
	Patients	Treatments	Patients	Treatments	Patients	Treatments	
Treatment at clinics	6,788	26,130	168	584	5	9	4,054
Domiciliary treatment	1,209	3,688	75	234	—	—	—
Total	7,997	29,818	243	818	5	9	

Total no. of patients = 8,245

Total no. of treatments = 30,645

Adaptation of homes to install artificial kidney machines

Circular 2/68 of the Ministry of Health authorised health authorities to make arrangements for the adaptation of dwellings or the provision of additional facilities which may be necessary for installing equipment to enable intermittent haemodialysis to be carried out at home. Adaptations were made during the year to five houses (including one in Chesterfield Borough), towards which the authority made financial contributions, bringing the number of cases assisted since 1967 to nine (including two in Chesterfield B.)

It is anticipated that the need for home adaptations of this nature will increase, and in order to deal as expeditiously as possible with requests the following procedure has been agreed:-

As soon as a request for renal dialysis facilities at home is received the house will be visited to ascertain whether it is feasible to accommodate the necessary equipment by (a) relatively small modifications to the home, or (b) if this is not possible, whether a mobile portakabin dialysis unit can be sited adjacent to the house, or, if neither (a) nor (b) is feasible, and it is not practicable to attempt to provide alternative accommodation whether adaptation of the patient's home by a traditionally built extension is feasible. It is considered that in most cases a portakabin unit is likely to be suitable. The use of such a pre-assembled self-contained unit reduces delay to a minimum (by storing one in the County ready for immediate delivery to the site when required it should be possible for the unit to become operational within a month). The cost is comparable with other types of structure when the quality of building required is taken into consideration together with the fact that a portakabin, being designed for a life in excess of 20 years, may be used over again in different locations within the County. Also the use of a portakabin avoids altering the design of a district council house (which can be left as a "standard" unit of accommodation) and in the case of a private house, no question of housing improvements arises. The cost of providing a portakabin and the extra drainage system and installing it is in the region of £1,300. Where a council house is involved the appropriate local housing authority will be asked to contribute 50% of the cost. Where a portakabin unit is installed, and it is no longer needed, then the local housing authority will be reimbursed a proportion of their contribution equivalent to the remaining estimated life of the unit.

Population screening surveys

Exfoliative cytology

(smear tests for cancer of the neck of the womb)

During the year, 5,666 cytology smears were taken at 25 clinics.

Pilot study of the national re-call scheme for cervical cytology

In 1966, when the national scheme for cervical cytology screening was introduced, it was mentioned that a national scheme of periodic re-call of patients with negative smears was being considered. In the meantime this authority adopted a local three-year re-call system. During 1971 the Department of Health and Social Security selected four areas, Derby, Derbyshire, Halifax and West Riding, to participate in a pilot study in which a thousand women from each area aged 35 and over who had a negative smear in 1966 were invited for a repeat smear. As a result of this pilot study it has been decided to introduce a national re-call scheme for women of 35 or over who had a negative test five years before, commencing in January, 1972.

Phenylketonuria

In the greater part of the county, i.e. that which lies within the area of the Sheffield Regional Hospital Board, the domiciliary midwives carried out the "Guthrie" blood test for the detection of phenylketonuria. In the north-west of the county, which is within the area of the Manchester Regional Hospital Board, the phenistix test continued in operation until September, when it was replaced by the "Scriver" test.

Two positive results were recorded in children born during the year.

PART V—AMBULANCE SERVICE

Structure and organisation

During the year the administrative county was served by a wholly directly operated service from:-

(a) four main stations with radio control and two sub-stations (one of these sub-stations, namely the new station at Heath to give additional cover to the London—Yorkshire (M.1) motorway as well as to the eastern boundary of the county, was completed and became fully operational on 1st February, 1971) all of which were manned throughout the 24 hours; and

(b) eight sub-stations manned from 8 a.m. to midnight daily.

In respect of the stations manned for 16 hours daily, night cover was afforded by standby arrangements augmented by the main stations' resources, with the exception of Glossop where night cover was given by the Duckingfield Ambulance Station operated by Cheshire County Council, until 17th January, 1971. From 18th January, 1971, however, night cover was afforded by standby arrangements at Glossop.

The special mutual aid arrangements between the county council and Derby County Borough which were commenced on 1st January, 1969 were continued during the year.

The Superintendents of the main stations continued to supervise the day stations within their own telephone area during the absence of the day station Superintendents for short periods.

The following procedure is adopted for calling an ambulance:-

(a) *Urgent calls*

If ambulance transport is required to deal with an urgent case, such as a street accident, all that is necessary is to call the telephone exchange operator and ask for "Ambulance". The caller would be automatically put through to the appropriate ambulance station, when the call would be accepted and dealt with regardless of whom the caller might be.

(b) *Non-urgent calls*

If a patient is suffering from a non-urgent condition, an ambulance or other form of suitable transport would be provided as appropriate, on the authority of a doctor, dentist, nurse or midwife, providing, of course, the patient cannot reasonably be required to travel by public transport.

The Council has kept all hospitals and other institutions for the sick, all general medical practitioners, dentists, nurses, domiciliary midwives, the police, the fire service and telephone authorities, in or serving the county, informed of the addresses and telephone numbers of the ambulance stations in the county and the method of calling an ambulance.

The arrangements, which were made at the inception of the service, whereby the New Mills Ambulance Station gave ambulance cover to the Disley area on behalf of the Cheshire County Council throughout the 24 hours, were continued. Similar reciprocal arrangements in force since the "appointed day" with other neighbouring authorities along the whole of the County boundary were continued, in the interests of economy and efficiency.

As in the past, all long distance journeys outside the county were dealt with centrally. In order to reduce the amount of detailed accounting in respect of journeys undertaken on behalf of other authorities, the arrangements with certain neighbouring authorities to waive charges were continued during the year.

The following is a list of addresses and telephone numbers of the County Council's Ambulance Stations at the time of writing this Report.

Addresses and Telephone Numbers of Ambulance Stations.

Ambulance Station	Telephone Numbers		Address
	8 a.m. - midnight	midnight - 8 a.m.	
Main Station *MICKLEOVER ..	Derby 53916		Station Road, Mickleover, Derby.
Sub-Stations Ashbourne ..	Ashbourne 3236		Park Avenue, Ashbourne.
Long Eaton ..	Long Eaton 5151		Briar Gate, Long Eaton.
Swadlincote ..	Swadlincote 7041		Civic Centre, Off Midland Road, Swadlincote.
Main Station *RIPLEY ..	Ripley 2175		Ivy Grove, Ripley.
Sub-Stations Ilkeston ..	Ilkeston 3401		Manners Avenue, Ilkeston.
Matlock ..	Matlock 2291		Sherwood Road, Matlock.
Main Station *BUXTON ..	Buxton 2012		Park Road, Buxton.
Sub-Stations New Mills ..	New Mills 3333		Park Road, New Mills.
Bakewell ..	Bakewell 2551		Baslow Road, Bakewell.
Glossop ..	Glossop 3101		Chapel Street, Glossop.
Main Station *CHESTERFIELD ..	At all times		Old Road, Ashgate, Chesterfield.
Sub-Stations **Eckington ..	Chesterfield 6282		Castle Hill, Eckington.
***Heath ..			M1, Compound, Holmewood Road, Heath.

*Manned throughout the 24 hours and equipped for radio control.

**Manned throughout the 24 hours. Apart from the requisitioning of ambulance transport, the Telephone No. of this Station is Eckington 2391.

***Manned throughout the 24 hours. Apart from the requisitioning of ambulance transport, the Telephone No. of this Station is Holmewood 651.

NOTES : (a) For all emergency cases, call the Telephone Exchange and ask Operator for "AMBULANCE".

(b) In all cases of difficulty in contacting a Sub-Station manned only from 8 a.m. to midnight contact should be made, where necessary, with the appropriate Main Station indicated above.

Conveyance of mentally disordered patients

No change was made in connection with the transportation of mental patients. The Mickleover Ambulance Station, which is located approximately one mile from the Pastures Hospital, conveyed mental patients to and from that hospital; under this arrangement full advantage was taken of the use of specially trained nurses from the hospital, for escort purposes. The remaining ambulance stations in the county dealt with the transportation of mental patients outside the scope of this arrangement.

During the year the Matlock Ambulance Station provided transport for the conveyance of patients to and from the Special Care Unit at Belper. Transport was similarly provided by the Ilkeston and Long Eaton Ambulance Stations from June, 1969, for the conveyance of patients to and from the Special Care Unit at Stanton Vale, Ilkeston. These arrangements were discontinued in January, 1972 when the Director of Education made alternative arrangements for the transportation of these patients.

The special vehicle for the transportation of the physically handicapped which had been operating from the Matlock Ambulance Station on behalf of the Social Services Department was transferred to the Heath Ambulance Station and during the year three additional vehicles based on the Chesterfield, Glossop and Long Eaton Ambulance Stations were introduced. The Ambulance Service was responsible for their general maintenance and providing the drivers.

Conveyance of patients by rail

Whilst the conveyance of patients by ambulance/rail/ambulance transport is generally accepted as the recognised method for long distance journeys, difficulties are becoming more prevalent in obtaining a suitable compartment for this purpose. The number of rail journeys undertaken during the year under review was 86 compared with 100 the previous year.

Infectious diseases

As in the past, no special vehicles were set aside for this purpose and all cases of infectious diseases requiring ambulance transport were conveyed by the general ambulance service. All ambulance personnel are familiar with the procedure for the disinfection of ambulances and equipment.

With regard to the transportation of cases of smallpox or suspected smallpox, however, the arrangements made by the Regional Liaison Committee of Local Health Authorities and the Sheffield and Manchester Regional Hospital Boards were continued. This provided for the transportation of all cases or suspected cases of smallpox arising in the north of the region to be dealt with by the Sheffield Ambulance Service and in the south of the region by the Leicestershire Ambulance Service; also for all such cases arising in the north-west of the County to be conveyed by the Manchester Ambulance Service.

All ambulance personnel under the conditions of appointment are required to agree to vaccination against smallpox at such intervals as may be determined by the County Medical Officer of Health, and the following table shows the number vaccinated during the past five years, in accordance with the policy instituted in 1951 for this to be carried out biennially:-

Year	Smallpox Vaccinations			
1967	93
1968	143
1969	93
1970	124
1971	116

Major accidents

The procedure for dealing with major accidents is reviewed from time to time and amended instructions issued due to changed circumstances either within the Police, Fire and Ambulance Services or the Hospital Organisation, as well as in the light of experiences reported on major incidents in other parts of the country.

During the year, in conjunction with the other emergency services, meetings took place with the staff of the East Midlands Airport in connection with major accident procedure and exercises were arranged.

Telecommunications

The system comprising the use of two frequencies, i.e. one for the north and one for the south of the county, was continued during the year. The following table indicates the number of mobile equipments under the respective fixed stations on 31st December, 1971.

<i>Controlling Base Station</i>	<i>Sub-Station</i>	<i>Number of Mobile Equipments</i>
Buxton	.. ..	11
	<i>Bakewell</i> ..	5
	<i>Glossop</i> ..	6
	<i>New Mills</i> ..	5
Chesterfield	.. ..	13
	<i>Eckington</i> ..	10
	<i>Heath</i> ..	6
Mickleover	.. ..	8
	<i>Ashbourne</i> ..	4
	<i>Long Eaton</i> ..	7
	<i>Swadlincote</i> ..	6
Ripley	.. ..	13
	<i>Ilkeston</i> ..	6
	<i>Matlock</i> ..	6
<i>Total</i>		106

In addition to the above each of the four control stations at Buxton, Chesterfield, Mickleover and Ripley hold special UHF equipment with pocket sets for dealing with major incidents.

Personnel

(a) *Safe driving awards*

(a) Safe driving awards
The following table shows the results of the 1971 competition of the Royal Society for the Prevention of Accidents, together with those of the previous five years:-

Year	Entered	Not Eligible	Discharged	Diploma	5 Year Medals	Bar to 5 Year Medals	10 Year Medals	Bar to 10 Year Medals	15 Year Brooch	Bar to 15 Year Brooch	20 Year Brooch	Bar to 20 Year Brooch	25 Year Brooch	Bar to 25 Year Brooch	Exemptions
1966	227	10	34	74	4	56	3	25	10	8	1	1	1	1	9
1967	242	5	26	108	5	43	9	23	3	9	1	1	1	1	7
1968	237	2	33	91	8	40	7	13	4	3	1	1	1	1	10
1969	198	2	32	89	16	28	6	26	3	12	3	1	1	1	10
1970	199	5	38	76	17	35	1	23	4	12	4	1	1	1	13
1971	201	4	29	73					5	5					

The total number of accidents in which ambulance service vehicles were involved during the year was 116, compared with 119 for 1970.

(b) *Training*

During the year the service continued its policy of training by way of induction courses held at South Darley for new entrants and by the attendance of ambulance personnel on six weeks' basic training courses (leading to the award of the Proficiency Certificate) and on two weeks' refresher courses at Wrenbury Hall, Cheshire.

(c) *Establishment*

The following table shows the authorised establishment of ambulance personnel at 31st December, 1971:-

Ambulance Station	Station Superin- tendents	Shift Leaders	Senior Drivers	Driver/Attendants			Total
				Rotary Shift Workers	Alter- nating Shift Workers	Day Workers	
Ashbourne	1	—	1	—	8	—	10
Bakewell	1	—	1	—	9	—	11
Buxton	1	5	—	24	—	2	32
Chesterfield	1	5	—	24	—	7	37
Eckington	1	5	—	20	—	1	27
Glossop	1	—	1	—	9	1	12
Heath	1	5	—	12	—	6	24
Ilkeston	1	—	1	—	10	—	12
Long Eaton	1	—	1	—	10	1	13
Matlock	1	—	1	—	10	2	14
Mickleover	1	5	—	21	—	3	30
New Mills	1	—	1	—	9	1	12
Ripley	1	5	—	24	—	9	39
Swadlincote	1	—	1	—	10	1	13
TOTAL	14	30	8	125	75	34	286

Vehicles

In respect of the year under review the following vehicles were ordered:-

- (a) Five Bedford/Hanlon ambulances (2/4 stretcher type) on the J.1 chassis;
- (b) Two Land Rover/Lomas ambulances.

The following vehicles were operational on 31st December, 1971:-

<i>Location</i>		<i>Number of ambulances</i>	<i>Number of light ambulances</i>
Ashbourne	..	4	-
Bakewell	..	3	2
Buxton	..	8	3
Chesterfield	..	10	2
Eckington	..	6	3
Glossop	..	3	2
Heath	..	5	1
Ilkeston	..	4	2
Long Eaton	..	5	1
Matlock	..	4	2
Mickleover	..	6	3
New Mills	..	4	1
Ripley	..	9	2
Swadlincote	..	4	2
Totals		75	26

The following Table shows the number of patients conveyed by ambulance stations and the mileage covered by ambulances and light ambulances during 1971:-

Station	Light Ambulances			Ambulances			Totals			
	Accident & emergency	Total cases	Mileages	Accident & emergency	Total cases	Mileages	Accident & emergency	Total cases	Mileages	
Buxton	20	6,601	63,506	662	13,267	98,885	682	19,868	162,391
Chesterfield	11	5,534	38,794	1,332	30,194	172,562	1,343	35,728	211,356
Eckington	44	7,437	61,208	923	17,803	122,157	967	25,240	183,365
Heath	7	3,096	27,326	665	16,023	98,947	672	19,119	126,273
Mickleover	13	6,525	75,514	597	13,314	133,543	610	19,839	209,057
Ripley	9	6,618	58,424	958	35,364	277,694	967	41,982	336,118
Ashbourne	5	1,013	10,489	300	6,252	51,481	305	7,265	61,970
Bakewell	8	4,130	49,103	295	4,655	52,584	303	8,785	101,687
Glossop	35	4,119	25,294	808	12,876	77,464	843	16,995	102,758
Ilkeston	23	5,237	44,235	562	14,133	70,706	585	19,370	114,941
Long Eaton	12	3,729	23,443	494	18,323	98,399	506	22,052	121,842
Matlock	20	6,079	53,049	562	11,106	74,648	582	17,185	127,697
New Mills	4	1,551	13,678	204	11,331	67,498	208	12,882	81,176
Swadlincote	7	7,216	42,491	339	18,741	87,127	346	25,957	129,618
TOTALS ..	218	68,885	586,554	8,701	223,382	1,483,695	8,919	292,267	2,070,249	

NOTE: The above figures do not include the respective details for patients carried by the Matlock Ambulance Station to and from the Special Care Unit at Belper, the Long Eaton and Ilkeston Ambulance Stations to and from the Stanton Vale Special Care Unit, the Ashbourne Ambulance Station to and from the Cokayne Special Care Unit and the Glossop, New Mills and Buxton Ambulance Stations to and from the Alderbrook Special Care Unit.

PART VI—OTHER SERVICES

Health Centres and Clinics

Brimington clinic

A new clinic at Church Street, Brimington, was completed and came into operation in February 1971.

Eckington clinic/health centre

The existing clinic at Gosber Street, Eckington, has been adapted and extended in order to provide health centre facilities for two practices of three and two general medical practitioners, in addition to the authority's health services, and came into use as a health centre in October, 1971.

Ashbourne health centre

Work commenced in January, 1972, on the erection of a health centre in Compton, Ashbourne, to accommodate two group practices, each of three general medical practitioners, together with the authority's health services. This new health centre is expected to be completed by December, 1972.

Chesterfield Borough—health centre

A health centre is to be erected on a site at Saltergate, Chesterfield, to provide accommodation for 12 general medical practitioners and facilities for the local authority's health services.

Tibshelf health centre

It is proposed to provide a health centre by an extension based on the existing modern purpose-built doctors' surgery in High Street, Tibshelf, thus providing facilities for the local authority health services as well as the three general practitioners.

Clowne health centre.

The existing clinic at Clowne is to be adapted and extended to provide a health centre for three general medical practitioners in addition to the present local health authority services.

Registration of Nursing Homes

The County Council acts as the Authority for the Registration of Nursing Homes under sections 187 to 194 of the Public Health Act, 1936, for the whole of the Administrative County except the Boroughs of Chesterfield, Glossop and Ilkeston, the duties having been delegated to the Corporations of these Boroughs by the County Council under section 194 of the same Act. Following a report after an inspection by a medical officer on the staff of the health department, consideration is given to the registration of premises for an approved number of maternity or general nursing beds.

The position on December 31st, 1971 regarding the Homes registered in the county, except in the Boroughs mentioned above, is shown below:-

<i>Name and Address of Nursing Home</i>	<i>Accommodation approved</i>
Portland Nursing Home, "Craiglands", The Park, Buxton	17 Medical Cases.
Derby House Nursing Home, Broad Walk, Buxton	31 Medical Cases.
Lismore Nursing Home, 14 Lismore Road, Buxton	19 Cases.
St. Mary's Nursing Home, Ednaston Lodge, Ednaston	22 Medical and Surgical Cases.
Cliff House Nursing Home, Cliff House, Clowne, Nr. Chesterfield	18 Medical Cases.
Borrowash House, Borrowash, Derby ..	20 Unmarried Mothers.

The Nurses Agencies Act, 1957

This Act provides that "a person carrying on an agency for the supply of nurses shall, in carrying on that agency, only supply (a) registered nurses; (b) enrolled assistant nurses; (c) certified midwives; (d) such other classes of persons as may be prescribed."

Every person to whom a nurse is supplied by an agency is to be given a statement in writing of the qualifications of the person supplied, and such agencies are not to be carried on unless the selection of the person to be supplied for each particular case is made by or under the supervision of a registered nurse or a registered medical practitioner. The main provision of the Act affecting the County Council is that no person shall carry on an agency for the supply of nurses unless he is the holder of a licence issued by the local authority authorising him to do so. At the end of the year two nursing agencies were licensed by this Authority.

PART VII—EPIDEMIOLOGY

Vaccination and immunisation

The authority's services provide immunisation facilities against diphtheria, measles, german measles (rubella), poliomyelitis, tetanus and whooping cough. These prophylactics are available at the County Council's clinics, or if patients desire they can be administered by their own medical practitioners, to whom the County Council makes available the appropriate antigens.

Diphtheria, pertussis (whooping cough), tetanus, poliomyelitis, measles and rubella.

The following is a copy of the return submitted to the Department of Health and Social Security:-

Vaccination of persons under age 16 completed during 1971

TABLE 1—Completed Primary Courses—Number of persons under age 16.

Type of vaccine or dose	Year of Birth					Others under age 16	Total
	1971	1970	1969	1968	1964-67		
1. Quadruple DTPP ..	—	—	—	—	—	—	—
2. Triple DTP ..	615	5,132	1,553	202	206	71	7,779
3. Diphtheria/Pertussis ..	—	3	3	—	1	3	10
4. Diphtheria/Tetanus ..	15	113	48	14	206	91	487
5. Diphtheria ..	—	2	3	—	4	3	12
6. Pertussis ..	—	4	4	2	1	—	11
7. Tetanus ..	5	9	6	5	39	502	566
8. Salk ..	—	—	—	—	—	—	—
9. Sabin ..	510	5,272	1,611	247	440	179	8,259
10. Measles ..	23	2,439	2,221	800	1,264	180	6,927
11. Rubella ..	6	2	6	1	11	3,960	3,986
12. Lines 1+2+3+4+5 (Diphtheria) ..	630	5,250	1,607	216	417	168	8,288
13. Lines 1+2+3+6 (Whooping Cough) ..	615	5,139	1,560	204	208	74	7,800
14. Lines 1+2+4+7 (Tetanus) ..	635	5,254	1,607	221	451	664	8,832
15. Lines 1+8+9 (Polio) ..	510	5,272	1,611	247	440	179	8,259

TABLE 2—Reinforcing Doses—Number of persons under age 16.

Type of vaccine or dose	Year of Birth					Others under age 16	Total
	1971	1970	1969	1968	1964-67		
1. Quadruple DTPP	—	—	—	—	—	—	—
2. Triple DTP	4	165	581	158	1,925	280	3,113
3. Diphtheria/Pertussis	—	—	—	—	11	4	15
4. Diphtheria/Tetanus	5	38	136	75	4,957	994	6,205
5. Diphtheria	—	—	—	—	12	11	23
6. Pertussis	—	—	—	—	1	—	1
7. Tetanus	8	2	10	19	147	1,749	1,935
8. Salk	—	—	—	—	—	—	—
9. Sabin	12	82	115	103	6,934	2,476	9,722
10. Lines 1+2+3+4+5 (Diphtheria)	9	203	717	233	6,905	1,289	9,356
11. Lines 1+2+3+6 (Whooping Cough)	4	165	581	158	1,937	284	3,129
12. Lines 1+2+4+7 (Tetanus)	17	205	727	252	7,029	3,023	11,253
13. Lines 1+8+9 (Polio)	12	82	115	103	6,934	2,476	9,722

Vaccination against smallpox

The Joint Committee on Vaccination and Immunisation has reviewed the indications for offering vaccination against smallpox in Great Britain at the present time. While vaccination remains the most reliable measure for the protection of individuals liable to be exposed to this disease, it is a procedure which has a very small but finite risk of serious complications. Changes in the prevalence of smallpox in countries overseas, with a consequent diminution in the likelihood of the occurrence of outbreaks in this country, have prompted a re-assessment of the balance of the risks involved in the currently recommended schedule of smallpox vaccination against the benefits that may be expected from it. The Secretary of State accepted the Joint Committee's advice that:—(i) vaccination against smallpox need not now be recommended as a routine procedure in early childhood; (ii) all travellers to and from areas of the world where smallpox is endemic or countries where eradication programmes are in progress should be protected by recent vaccination; (iii) health service staff who come into contact with patients should be offered vaccination and regular re-vaccination.

This advice was circulated to all medical practitioners and appropriate local health authority staff, and vaccination against smallpox ceased to be carried out as a routine procedure in infancy.

Bacillus Calmette Guerin (B.C.G.) vaccination against tuberculosis

There are two schemes for vaccination against tuberculosis: first, the contact scheme which is carried out by Chest Physicians through the chest clinics; and second the routine vaccination of school children between their 13th and 14th birthdays (subject to parental consent). Details of the work carried out under the two schemes are given below:-

	<i>Contact scheme</i>	<i>School children and students</i>
No. skin tested ..	578	6,132
No. found positive ..	62	751
No. found negative ..	460	5,060
No. vaccinated ..	264	5,052

Yellow fever

Persons who propose to travel to certain countries are required to possess an International Certificate of Vaccination against yellow fever as a condition of entry. The County Council's clinic at Cathedral Road, Derby, has been designated by the Department of Health and Social Security as one of the 47 centres in the country available for giving this form of vaccination, and since the scheme came into operation on 1st July, 1960, a medical officer of the County Council's staff has attended this clinic each Monday morning to vaccinate intending travellers. A charge of £1.05 is made for each vaccination performed. During the year 512 persons were vaccinated against yellow fever and provided with International Certificates.

Tuberculosis

The following are particulars of the new cases of tuberculosis of which notification was received during 1971:-

<i>Age Groups</i>	0	1	2	5	10	15	20	25	35	45	55	65	75	<i>Total All Ages</i>
<i>Respiratory</i> —														
Males ..	—	—	—	—	1	1	3	5	2	7	8	9	3	39
Females ..	—	—	1	—	2	1	3	3	2	5	4	1	2	24
<i>Non-Respiratory</i> —														
Males ..	—	—	—	—	—	—	1	3	—	1	—	—	—	5
Females ..	—	—	—	2	—	—	—	1	2	1	1	1	2	10
Total ..	—	—	1	2	3	2	7	12	6	14	13	11	7	78

The following table shows the numbers of new cases and deaths since 1914, when the figures were first recorded. It will be seen that the steady and generally consistent decline in new cases has not been maintained in 1971.

Year	Respiratory		Non-respiratory	
	New cases	Deaths	New cases	Deaths
1914 ..	867	383	362	156
1924 ..	829	359	338	117
1934 ..	442	243	202	74
1944 ..	432	202	163	43
1954 ..	391	80	62	12
1964 ..	171	24	26	2
1965 ..	145	29	30	3
1966 ..	106	28	29	4
1967 ..	85	18	16	—
1968 ..	79	14	24	4
1969 ..	63	11	13	10
1970 ..	57	13*	6	1
1971 ..	63	17**	15	1

*Includes 8 deaths from late effects of respiratory tuberculosis.

** .. 4

Venereal Disease

The following information has been received from treatment centres concerning the attendances of Derbyshire residents:-

Treatment Centre	Totals all venereal conditions	Number of new cases in the year			
		Syphilis		Gonorrhoea	Other venereal conditions
		Primary & Secondary	Other		
Royal Hospital, Chesterfield ..	544	1	2	109	432
Derbyshire Royal Infirmary ..	461	—	3	44	414
Burton & District Hospital ..	45	—	—	17	28
St. Thomas' Hospital, Stockport ..	60	—	1	19	40
Mansfield General Hospital ..	26	—	—	4	22
Royal Infirmary, Sheffield ..	99	—	—	20	79
Special Treatment Centre, Nottingham ..	208	—	—	45	163
Ashton-under- Lyne General Hospital ..	6	—	—	2	4
Totals ..	1,449	1	6	260	1,182

The County Council's medical officers and health visitors have been designated to undertake contact tracing and follow-up persons believed to be suffering from venereal disease, with a view to persuading them voluntarily to undergo a medical examination, and, if necessary, to receive treatment.

The subject of sex education and personal hygiene forms part of the programme of health education: 1,848 sessions were assigned to this during the year.

PART VIII—ENVIRONMENTAL HEALTH

Inspection and supervision of food

Milk supply

The Milk (Special Designation) Regulations, 1963-5.

As a Food and Drugs Authority, the County Council is responsible for the licensing and supervision under these Regulations of milk heat treatment plants and milk dealers, other than producer-retailers. Under the Food and Drugs Act, 1955, the County Council is also responsible for the prevention of sale of milk from cows suffering from tuberculosis and certain other specified diseases. The samples taken in connection with this work are dealt with at the Public Health Service Laboratory at Derby and thanks are expressed to the Director for his ready co-operation at all times.

No changes in the Regulations were made during the year and the current list of types of licences remains as follows:-

- (i) dealers' licences for the operation of:-
 - (a) pasteurised;
 - (b) sterilized;
 - (c) ultra heat treated milk processing establishments;
- (ii) dealer's (untreated) licence, required when untreated milk, in bulk, is obtained for re-sale;
- (iii) dealer's (pre-packed milk) licence, required when dealing in pre-packed milk of any or all of the four designations.

All licences were renewable at the end of 1970, for a further period of five years.

Pasteurising plants

Six pasteurising plants were in operation during 1971. The full list of establishments is given below.

<i>Name</i>	<i>Address of Establishment</i>
Buxton Spa Dairies Ltd.	The Creamery, Green Lane, Buxton.
Ilkeston Co-op. Society Ltd.	Derby Road, Ilkeston.
A. Heathcote & Son Ltd.	Foxlow Farm, Buxton.
J. Payne	Sunny View Dairy, Buxton.
Unigate Foods Ltd.	Egginton, Derby.
B. Wild	Beard Hall Farm, New Mills.

Of the six plants, three were "high temperature short time" (H.T.S.T.) and three "holder" types.

Supervision of all plants is carried out as a regular routine. Generally speaking, very little trouble is encountered and Dairy Managers are most anxious to co-operate with the authority.

The sampling figures for the year are given below.

Grade of Milk	Satisfactory		Unsatisfactory		Total number of samples submitted
	M.B.	Phos.	M.B.	Phos.	
Pasteurised	74	83	1	2	85

NOTE: (a) M.B. means the Methylene Blue Test; Phos. means the Phosphatase Test.

(b) Eleven samples were not subjected to the Methylene Blue Test as the atmospheric shade temperature exceeded 70°F. at the time of testing.

The two phosphatase test failures were from "holder" plants and in each instance the cause was inadequate holding time and/or temperature. In one case a formal warning under the Food and Drugs Act 1955 was issued to the owners in view of previous sampling failures. With regard to the methylene blue failure, it was thought that some of the incoming raw milk was of inferior keeping quality and the owner of the plant agreed to introduce routine testing of his raw milk intake.

Sterilizing Plants

Ultra-heat treatment Plants

There are no plants of either type in the County.

Milk Dealers

The number of licensed dealers is given below. Following re-licensing at the end of 1970 a fairly stable figure can now be reported.

Dealers untreated milk (bulk As at 1.1.71 handling and bottling) licences ..	As at 31.12.71
	10
Dealers pre-packed milk licences	817

There is still a hard core of untreated milk sales (the Ministry of Agriculture licence producer/retailers) in the County and although the brucella abortus campaign has helped to reduce these sales, it is quite clear that some of the population prefer to purchase and drink raw milk and will continue to do so as long as it is available.

Mention was made in the Report for 1969 of a Parliamentary answer on the question of the sale of untreated milk. Then the Minister of Agriculture saw no reason to alter the system. The Minister was further questioned on this matter in October, 1971, and his reply indicated that the system of granting licences for the sale of untreated milk without regard to an alternative supply of heat-treated milk was being looked at; an interesting change of attitude.

The sampling figures from milk dealers for 1971 are set out below:-

Grade of Milk	Satisfactory		Unsatisfactory		Total number of samples submitted
	M.B.	Phos.	M.B.	Phos.	
Heat Treated Pasteurised .. .	*877	992	26	4	996
*93 samples not tested for Methylene Blue as shade temperature exceeded 70°F.					
Sterilized .. .	Turbidity				71
	Satisfactory	Unsatisfactory			
Sterilized .. .	71	-			71
Ultra-Heat Treated .. .	Colony Count				25
	Satisfactory	Unsatisfactory			
Ultra-Heat Treated .. .	25	-			25
Raw Untreated .. .	Methylene Blue				70
	Satisfactory	Unsatisfactory			
Raw Untreated .. .	*54	9			70
*7 samples not tested for Methylene Blue as shade temperature exceeded 70°F.					
Total ..		1,162			

The overall sample results are reasonably satisfactory, and generally speaking show gradual improvement from year to year. Of the 4 phosphatase test failures 3 originated from dairies with "holder" type plants in the County, but of them 2 occurred from samples taken on the same day and processed at the same dairy. Some negligence seemed to be responsible for these failures, which clearly should not have happened. With a total of 35 methylene blue test failures there is room for improvement here and persistent

routine sampling seems to be as good a way as any to bring such a figure down.

Packaging of milk continues to receive attention by the trade. One innovation during the year was the appearance at a supermarket chain of pasteurised milk in plastic bottles, whosealed by a dairy in the Manchester area.

Of the total number of samples taken, including those from pasteurising plants, 1,247 in all, 666 (53%) were from two processing dairies in Sheffield and Nottingham, 1,041 (83.5%) from nine dairies, and 1,118 (89.6%) from thirteen dairies. Each year, these percentages increase, and bear witness to the concentration of the wholesaling trade.

Brucella abortus sampling was carried out on a limited scale by the County Health Inspector. District Councils in the County are responsible for the main sampling programme. On behalf of the County Council, laboratory examinations were made of 98 milk samples from raw milk sold by retail of which 9 were ring test positive, and 2 positive on guinea pig test. The majority of these samples were bottle samples and the percentage positive was 2.0, much less than in previous years.

These cases were dealt with in accordance with established procedure. Notification is made to the producer, Divisional Veterinary Officer of the Ministry of Agriculture, Fisheries and Food, and to the Medical Officer of Health of the District where the milk was produced. The last has powers, under the Milk and Dairies (General) Regulations, 1959, to place restrictions upon the sale of such milk for human consumption.

As regards sampling by the District Councils, the following figures submitted by the District Medical Officers show what has been done during the year:-

Type of sample	Total number taken	Ring test		Culture		Guinea pig	
		Posi- tive	Nega- tive	Posi- tive	Nega- tive	Posi- tive	Nega- tive
Bottle ..	104	8	96	—	8	—	3
Herd ..	351	26	325	3	14	4	11
Group ..	25	13	12	4	9	5	4
Individual ..	234	54	180	10	87	8	29
.. Total ..	714	101	613	17	118	17	47

Compulsory eradication of brucellosis on a national scale started in March 1971 and the Government have now announced firm dates for further areas and also indicated the future scheduled programme as far ahead as early 1975. Derbyshire does not feature in this programme.

Fluoridation of public water supplies

The agreement between the County Council, the Derby Borough Council and the South Derbyshire Water Board for the fluoridation of water supplies within the Board's area was completed on 31st December, 1970, and progress in implementation has followed that agreement. Two treatment stations at Little Eaton and Homesford (the latter with two feeds to reservoirs at Crich and Chadwick Nick) have been in operation during 1971. These two stations cover 80% of the population in the Board's area in the County (some 33% of the total county population.) During the year another station was installed and commissioned at Risley (to cover Risley, part of Long Eaton, Sawley and Draycott). This plant will eventually be dispensed with when mains reorganisation is carried out from the Little Eaton works. In addition, the Board was proceeding with the installation of proportioning gear (mixture controls) to enable the Belper U.D. area to receive fluoridated water by the beginning of 1972. In fact, the Engineer has confirmed that this section is now operational (January, 1972). The programme still to be completed includes treatment plants at Belper Meadows, Stanton-by-Bridge, Wirksworth and Lindway, all scheduled for completion by 1973, which is later than originally anticipated. One part of the Board's area, covered by the Cubley borehole in Ashbourne R.D., receives water with natural fluoride up to 0.98 p.p.m.

An agreement was completed in December, 1971, for the fluoridation of water supplies in the Buxton area, between the County Council and the North Derbyshire Water Board. This scheme is well advanced and should be operational during 1972.

Samples of the fluoridated water supplies have been taken by the County Public Health Inspector at various points on the distribution system and submitted to the County Analyst for examination.

The results of these tests are given below. It will be noted that no excess readings have been obtained:-

Treatment Station	Fluoride in p.p.m.					
	0.6	0.7	0.8	0.9	1.0	Total
Homesford (Chadwick Nick) ..	4	3	12	14	1	34
Homesford (Crich) ..	—	1	5	4	2	12
Homesford (Crich) and Little Eaton (mixture) ..	—	1	5	4	3	13
Total ..	4	5	22	22	6	59

An arrangement has been made with the Engineer to the South Water Board whereby sampling figures are exchanged.

General sanitary administration

(NOTE—One urban authority has not been able to provide figures for inclusion in this section of the Report).

Estimated number of houses:-

Municipal Boroughs and Urban Districts ..	135,510
Rural Districts	96,378

	<i>Municipal Boroughs and Urban Districts</i>		<i>Rural Districts</i>	
	<i>No. on Register</i>	<i>In-spections made</i>	<i>No. on Register</i>	<i>In-spections made</i>
Bakehouses	89	249	25	54
Common Lodging Houses	2	7	—	—
Dairies	46	92	16	12
Factories and Workplaces	1,967	910	864	429
Ice Cream Premises—				
(a) Manufacturers	13	62	9	33
(b) Dealers	1,546	99	1,064	910
Milk Distributors	413	290	193	169
Movable Dwelling Sites	48	288	193	914
Offensive Trades	10	5	—	—
Outworkers	394	118	181	102
Preserved Food Stores	489	701	156	278
Offices, Shops and Railway Premises	3,589	2,494	1,266	1,023
Slaughterhouses—				
(a) Public Abattoirs	1	676	—	—
(b) Private	35	4,387	40	6,090
Knackers Yards	2	21	7	52

Water supplies

Rural Water Supplies and Sewerage Acts, 1944 to 1965.

Only one scheme was considered by the Department during the year. This was a small mains extension in Glossop by Manchester Corporation (the water undertakers for the area) at an estimated cost of £2,247.

The County is covered generally by Water Boards, but in part of the south by a private company. The following reports from the two principal Boards covers the greater part of the area of the County.

South Derbyshire Water Board (*Report kindly submitted by Mr. I. G. Edwards, B.Sc., M.I.C.E., M.I.W.E., Engineer and Manager*):

	<i>No. of Houses</i>	<i>Estimated Population Involved</i>
No. of houses connected to mains ..	92,246	264,312
No. of houses supplied from standpipes or mains	—	—
No. of houses not supplied from standpipes or mains	1,445	4,048
No. of connections made during year:-		
(a) existing houses	33	
(b) new houses	2,297	
(c) other premises	121	

Works carried out by the Board during the year, in addition to the normal extensions of distribution mains, were as follows:-

<i>Description</i>	<i>Starting Date</i>	<i>Completion Date</i>
12" dia./9" dia. Main—Crich/Wolds Service Reservoir (1.25 m.g.)	April, 1971	January, 1971
12" dia. Main—Duffield/Allestree Park Gates	April, 1971	October, 1971
Lea Moor Service Reservoir (6.375 m.g.)	May, 1971	
Homesford Treatment Works (Screening Plant)		May, 1971
12" dia. Main—Wolds Reservoir/Two Dales	June, 1971	
9" dia./6" dia. Main—Sydnope/Palethorpe	June, 1971	
6" dia. Main—Lea Pumping Station to Lea Moor	August, 1971	December, 1971
4" dia. Main—Hulland Hall/Hulland Products Limited	August, 1971	September, 1971
Ladyflatte Booster Station	September, 1971	
Demolition of Town End Reservoir	September, 1971	September, 1971
Chadwick Nick Transfer Pumping Station	October, 1971	
Wash Green Booster Station	October, 1971	
9" dia. Main—Lea Moor/Holloway	October, 1971	November, 1971
Reconstruction of Belper Meadows P.S.	October, 1971	
Sydnope Pumping Station	November, 1971	
Palethorpe Tank	November, 1971	
9" dia. Main—Ladyflatte/Bramfield Lane		December, 1971
9" dia. Main—Bramfield Lane to Wash Green Break Pressure Tank	December, 1971	

North Derbyshire Water Board (*Report kindly submitted by Mr. C. H. Crombie, M.I.C.E., M.I.W.E., Engineer and Manager*):

	<i>No. of Houses</i>	<i>Estimated Population Involved</i>	
No. of houses connected to mains..	103,601	317,555	(Registrar General's Estimate Mid 1970)
No. of houses supplied from standpipes on mains ..	15	45	
No. of houses not supplied from standpipes on mains ..	1,186	3,558	
No. of connections made during year:			
(a) existing houses.. . .	14		
(b) new houses ..	2,072		
(c) other premises ..	51		
			(11 R.V. 40 metered)

Major work carried out including the following:-

1. South Derbyshire Bulk Supply Scheme—
Phase II completed including Linacre Service Reservoir and Hare Edge Tank and trunk distribution main.
Phase III commenced late 1971, included trunk main from Hare Edge Tank to Holymoorside and new reservoir.
2. Phase I of Western Area Regional Scheme completed including to new reservoirs in Bakewell area.
3. Extension and improvements to Ogston Treatment Works substantially completed—new Pumphouse and Contact Tank commenced December, 1970.

Sewerage and sewage disposal

Rural Water Supplies and Sewerage Acts, 1944 to 1965.

Three schemes received approval during the year, as follows:-

<i>Authority submitting Scheme</i>	<i>Estimated Cost</i>
Chapel R.D.C.	Peak Forest and Sparrowpit £94,370
Chesterfield R.D.C.	Cutthorpe extension £2,085
Do.	Duckmanton extension £948

Information is given opposite of the position in the County with regard to sewerage and sewage disposal. Boroughs and Urban Districts have 99.1% of their houses connected to sewers, whilst Rural Districts have a corresponding figure of 91.4%.

	<i>Municipal Boroughs and Urban Districts</i>		<i>Rural Districts</i>	
		<i>Estimated Popu- lation Involved</i>		<i>Estimated Popu- lation Involved</i>
No. of Houses:				
(a) Connected to sewers ..	134,837	376,305	87,004	253,662
(b) Not connected to sewers ..	1,164	3,151	9,360	25,435
No. of connections made during year:				
(i) existing houses	85	—	100	—
(ii) new houses	2,279	—	1,423	—
(iii) other premises	99	—	15	—
No. of conversions of other closets to W.C.s	5	—	129	—

Some notes follow of improvements made, or in progress, in the various districts.

Alfreton U.D.C. 8,232 yards of new foul and surface sewers laid.

Ashbourne U.D.C. Work started on the extension and improvement of the sewage disposal works and the laying of a new trunk sewer.

Bakewell U.D.C. The construction of a new foul sewer from the Town Centre to the Haddon Road Pumping Station commenced.

Bolsover U.D.C. Work commenced on the major sewerage improvement scheme, including new disposal works at Bolsover and Shuttlewood.

Ripley U.D.C. Northern Sewage Works now in full operation; work on the remainder of the major sewerage and sewage disposal scheme in progress.

Ashbourne R.D.C. Yeaveley sewage works enlarged.

Bakewell R.D.C. Phases I and II of the Southern Area Sewerage Scheme completed.

Belper R.D.C. Schemes completed; (a) Horsley floor alleviation scheme; (b) Quarndon Scheme; (c) Re-laying of sewers in Heanor Road, Smalley; (d) Shipley Village pumping station and sewers, the flow turned into the Borough of Ilkeston's sewerage system. Schemes in progress: (a) Pentrich Scheme commenced; (b) Eastern Parishes Sewerage and Sewage Disposal Scheme commenced.

Chapel-en-le-Frith R.D.C. Hayfield Sewage Disposal Works being improved.

Chesterfield R.D.C. Works completed: (a) Grassmoor sewer renewal; (b) Cutthorpe sewer extension; (c) Cutthorpe pumping station; (d) Ashover sewer renewals. Works in progress: (a) Renishaw

sewage works re-construction; (b) Wingerworth trunk sewer renewal; (c) Westwood brook sewage purification scheme—work commenced; (d) Improvements to sewage works at Wessington, Holmesfield and Unstone.

Clowne R.D.C. Major improvements and extensions to sewage works at Whitwell completed.

South-East Derbyshire R.D.C. Extensions to sewage works at Melbourne.

Housing

Housing figures are always of interest and the performance of District Councils in connection with slum clearance, house improvement and new housing varies considerably. However, the Housing Act 1969 has put more enthusiasm into this area of local government and the figures shown in the tables for the County area reflect the increasing work being done. House improvement grants were up considerably, slum clearance better, improvement area work gathered pace, and Council housing building figures much higher. These figures are very much in accordance with the national ones shown in the annual report of the Minister for Housing and Construction for 1971.

SLUM CLEARANCE

	<i>Municipal Boroughs and Urban Districts</i>	<i>Rural Districts</i>
Estimated No. of houses declared unfit, 1955-1970	8,960	8,594
Total No. of houses demolished or closed 1955 to 31/12/1970	7,952	6,905
During 1970:—		
Houses demolished:		
(a) in Clearance Areas	328	327
(b) not in Clearance Areas	331	362
Unfit houses closed	54	28
Unfit houses made fit and houses in which defects were remedied	1,483	365
Unfit houses in temporary use	52	1
Houses in Clearance Areas purchased	125	84

IMPROVEMENT GRANTS

	<i>No. approved for conversion or improvement (Housing Acts 1969)</i>	<i>No. approved for improvement (Housing Act 1969) ('standard grants')</i>	<i>No. approved for special grant (Housing Act 1969)</i>
Municipal Boroughs and Urban Districts ..	592	1,593	7
Rural Districts ..	465	721	—

IMPROVEMENT AREAS

	<i>Municipal Boroughs and Urban Districts</i>	<i>Rural Districts</i>
(a) No. declared	4	1
(b) No. of houses in declared areas ..	1,530	158
(i) No. of improvable dwellings	1,485	149
(ii) No. of (i) above of tenanted improvable dwellings ..	1,355	75
(c) No. of houses lacking standard amenities	148	108
(d) No. of houses brought to: full standard	24	9
reduced standard	—	—

NEW HOUSING

	<i>No. of new dwellings completed during 1971</i>	
	<i>by local authorities</i>	<i>by private enterprise</i>
Municipal Boroughs & Urban Districts ..	511	1,844
Rural Districts	334	1,125

Swimming baths

The following Table shows the number of swimming baths in the County, and the results of the investigation on the samples taken.

	<i>No. of Baths</i>		<i>Samples taken</i>	
	<i>Public</i>	<i>Private (Open to Public)</i>	<i>Satis- factory</i>	<i>Unsatis- factory</i>
Municipal Boroughs and Urban Districts	14	5	285	4
Rural Districts	3	2	37	8

Refuse collection and disposal

The use of either paper or plastic sacks is growing in the County. The following notes from District Councils show how this is progressing.

Alfreton U.D.C. Paper and plastic sacks now available on request.

Ashbourne U.D.C. Plastic bin liners in use in all the district.

Bolsover U.D.C. Plastic bin liners in use on one estate.

Glossop Borough. Plastic bins supplied where no solid fuel is being used.

Heanor U.D.C. Plastic bin liners scheme extended to cover some 4,100 houses.

Ilkeston Borough. Plastic sacks being issued a week before holidays to obviate complaints of delays in collection.

Matlock U.D.C. All domestic premises now on plastic sack system. Plastic sacks sold to trade premises on request.

Ripley U.D.C. Residents may choose to purchase paper sack holders instead of bins and the Council will provide paper or plastic sacks as requested.

Swadlincote U.D.C. Plastic sacks system introduced for trial period (continued use confirmed in 1972).

Whaley Bridge U.D.C. Bin liners on trial for period of six months.

Wirksworth U.D.C. Plastic bin liner scheme introduced to 200 houses and other premises.

Belper R.D.C. Trials being conducted at Crich with paper sacks and bin liners.

Repton R.D.C. Some 10,000 houses now using plastic sacks.

The table below gives details of present methods:-

	Collection		Disposal		
	Direct Labour	Contract	No. of Controlled Tips	No. of Uncontrolled Tips	Destructor Works
Municipal Boroughs and Urban Districts	19	—	25	—	1
Rural Districts	8	—	19	1	—

Meat inspection

From information which has been provided by the District Councils, it appears the following animals were killed and inspected during the year:-

	Municipal Boroughs and Urban Districts	Rural Districts
	Number killed and Inspected	Number killed and Inspected
Cattle, excluding cows ..	25,750	11,454
Cows	20,327	6,084
Calves	244	185
Sheep and Lambs	58,214	39,971
Pigs	71,185	19,250
Horses	—	—

Moveable Dwellings

During the year a decision was made to establish a caravan site for gypsies and other travellers at Grassmoor in Chesterfield R.D., with room for ten families. The site is the first of its kind in the County, but the County Council has continued discussions with a number of local authorities in the hope that a further site can be provided in South Derbyshire in the next year or so.

Under the 1968 Caravan Sites Act county councils have a duty to provide adequate accommodation for gypsies.

In recent years many problems have arisen in Derbyshire by travellers setting up camp by road sides and on waste ground and agricultural land. Complaints have been received about the camps, the conduct of the gypsies and rubbish and litter.

It is hoped that many of these problems will diminish as travellers accept and use the new camps which are planned specifically to cater for their needs.

The camp at Grassmoor, which is being provided with the agreement of Chesterfield Rural Council, adjoins an industrial area soon to be restored. It is likely to include individual work areas for each caravan.

The table below sets out the figures for other types of sites already established in the County.

	Licensed Caravan Sites				Individual Licensed Vans	
	Holiday		Residential			
	Sites	Vans	Sites	Vans		
Municipal Boroughs ..	11	269	23	396	23	
and Urban Districts ..	74	856	104	600	90	
Rural Districts						

Offices, Shops and Railway Premises Act, 1963.

The figures below indicate the work that has been done during the year. These and other statistics have to be rendered annually to the Department of Employment and Productivity by local authorities:-

REGISTRATIONS AND GENERAL INSPECTIONS

Class of premises	No. of premises registered during the year		Total No. of registered premises at end of year		No. of registered premises receiving a general inspection during the year	
	M.Bs & U.Ds	R.Ds	M.Bs & U.Ds	R.Ds	M.Bs & U.Ds	R.Ds
Offices	29	3	888	184	266	67
Retail Shops	74	26	2,266	825	861	445
Wholesale shops, and warehouses	4	—	92	33	28	15
Catering establishments open to the public, canteens	9	8	312	207	105	106
Fuel storage depots ..	—	—	28	17	6	6
Totals ..	116	37	3,586	1,265	1,266	639

PERSONS EMPLOYED IN REGISTERED PREMISES

Class of workplace	No. of persons employed	
	M.Bs & U.Ds.	R.Ds
Offices	9,985	1,082
Retail shops	10,169	2,432
Wholesale departments, warehouses ..	1,073	249
Catering establishments open to the public ..	1,966	1,356
Canteens	118	45
Fuel storage depots	134	65
Total	23,445	5,455
Total Males	9,385	2,158
Total Females	14,060	3,297

Prevention of atmospheric pollution

County district councils have considerable powers under the provisions of the Clean Air Acts 1956 and 1968 to control atmospheric pollution. Such provision can be broadly divided into two parts viz:-

- (a) general regulatory powers;
- (b) powers to establish smoke control areas.

Sections of the 1968 Act made operative in 1969 facilitated the control of grit and dust emissions from furnaces, extended the provisions in relation to the approval of the height of new chimneys and enabled action to be taken against the sale of bituminous coal in smoke control areas.

Readings of deposit gauges, etc., in some of the districts are given below. In addition to those shown, some other Councils are operating gauges but figures in respect of them have not been made available. In order to make some of the figures more understandable the following extract from a report submitted by Dr. Nutten, the Medical Officer of Health for Buxton Borough may be found useful:-

"Professor P. J. Lawther recently Director of the Medical Research Council, Air Pollution Unit, said that in his view and on the present state of knowledge, smoke in any concentration was undesirable and could well constitute a hazard to health; it should be eliminated as far as was economically possible. There was no evidence, however, that reasonably low concentrations of sulphur dioxide were of themselves harmful, and if the concentrations of smoke were low, he would be inclined to accept peak concentrations of up to 1,000 microgrammes per cubic metre of sulphur dioxide, but would consider anything in excess of this to be potentially harmful, at least to some people. This would mean aiming at a limit of some 100 to 150 microgrammes per cubic metre for the average winter concentrations."

Station	Readings			
	Smoke		Sulphur Dioxide	
	Daily average over each month			
	Highest	Lowest	Highest	Lowest
Chesterfield Borough:				
Town Hall	572	5	693	35
Electricity Works	789	1	663	276
Newbold Green School	682	1	396	76
St. John's Road Depot	143	29	2.45	0.48
Sewage Works	110	35	1.72	0.58
Bolsover U.D.C.:				
Hall Farm, Woodhouse Lane ..	257.6	36.6	—	—
Moor Lane	286.0	41.2	2.89	0.59
Cundy Road	—	—	1.58	0.59
Staveley U.D.C.:				
Staveley Works Canteen ..	254.8	95.2	—	—
King George Playing Fields ..	151.8	32.6	3.34	0.58

The following is a summary of information supplied by some local authorities relating to atmospheric pollution:-

Bolsover U.D.C. One smoke control area covering 86 acres is in operation. It contains 233 houses. Routine gauge readings in the District revealed an increase in deposited matter but sulphur dioxide levels were the best ever recorded.

Buxton Borough. No. 1 Smoke Control Order submitted and now awaits result of hearing of objection by the Department of the Environment.

Chesterfield Borough. Survey of the 6th Smoke Control Area completed.

Glossop Borough. No. 5 Smoke Control Order confirmed; area covered 822 acres; premises covered 1,811.

Heanor U.D.C. Orders nos. 1 and 3 came into operation in April.

Ripley U.D.C. Order No. 2 (Holly Bush Farm and West Avenue Estates) came into operation on the 1st July.

Swadlincote U.D.C. No. 3 Smoke Control area confirmed and submitted to the Department of the Environment for approval.

Belper R.D.C. No. 3 (Shipley) Smoke Control Order came into operation on April 1st; area covered 735 acres; premises covered 85.

Chapel-en-le-Frith R.D.C. Dust from quarrying is a problem in the area and this will now be largely covered by the Alkali Inspectorate under the Alkali etc., Order 1971. The new cement plant at Hope became operative during the year and a considerable reduction has now taken place in the collected matter in the gauges at Hope and Brough.

Chesterfield R.D.C. The 13th Smoke Control area declared by the Council; confirmation now awaited.

Repton R.D.C. Monitoring of pollution in the vicinity of Drakelow and Willington Power Stations showed improved figures compared with the previous year. The monthly average of solid deposit in tons per square mile being 10.65 (1970=10.73), and the sulphur figures as expressed in milligrams of S.O.₃ per 100 sq. cm. per day were 1.03 (1970=1.24). These figures follow the national trend.

Appendix

MEDICAL AND DENTAL STAFF OF THE COUNTY HEALTH DEPARTMENT

(at 31st December 1971)

COUNTY MEDICAL OFFICER OF HEALTH
A. H. SNAITH, M.D., F.R.C.Path., D.P.H.

DEPUTY COUNTY MEDICAL OFFICER OF HEALTH
P. K. SYLVESTER, M.B., B.S., M.R.C.S., L.R.C.P., D.C.H., D.R.C.O.G.,
D.P.H.

PRINCIPAL MEDICAL OFFICER, SCHOOL HEALTH SERVICE
JULIA M. D. CORRIGAN, M.B., B.Ch., B.A.O., D.P.H.

PRINCIPAL MEDICAL OFFICER, PREVENTIVE AND NURSING SERVICES
K. CARTWRIGHT, M.B., Ch.B., D.P.H., D.P.M.

MEDICAL OFFICER FOR CHESTERFIELD BOROUGH
H. BAILEY, M.B., Ch.B., D.P.H.

DEPARTMENTAL MEDICAL OFFICERS

JILL BETHELL, M.B., Ch.B. (Part-time)
MARGARET CAMERON, M.B., Ch.B. (Part-time)
*MARGARET J. CASH, M.R.C.S., L.R.C.P., D.P.H. (Part-time)
SHEILA OLIVE COBURN, M.R.C.S., L.R.C.P. (Part-time)
*A. F. CROWLEY, M.B., B.Ch., B.A.O., D.R.C.O.G., D.P.H. (Part-time)
BARBARA M. DANCE, M.B., Ch.B. (Part-time)
MYRTLE P. DANIELS, B.Sc., M.B., B.S., D.R.C.O.G.
J. DUTHIE, M.B., Ch.B.
HAZEL M. FEARN, M.B., Ch.B.
J. A. GAWTHORPE, M.B., Ch.B.
WINIFRED GOW, M.B., Ch.B.
N. U. HASNAIN, M.B., B.S. (Part-time)
EVELYN B. HORTON, M.B., Ch.B. (Part-time)
J. A. HOWE, M.B., Ch.B., L.R.C.P., M.R.C.S. (Part-time)
MARY HUGHES, M.B., Ch.B. (Part-time)
JOAN B. M. LEITH, M.B., B.Ch., B.A.O. (Chesterfield Borough)
BETI ROBERTA LEVICK, M.B., B.Ch., (Part-time)
HELEN J. McGRATH, M.B., Ch.B. (Part-time)
MAITRAYEE MITRA, M.B., B.S. (Part-time)
THELMA H. W. MORKS, B.A., M.B., B.Ch., B.A.O.
*W. J. MORRISSEY, M.B., B.Ch., B.A.O., D.P.H. (Part-time)
*H. E. NUTTEN, M.B., Ch.B., D.P.H. (Part-time)
SHEELAGH PEEL, M.B., Ch.B., D.P.H. (Part-time)
ELEANOR M. SINGER, M.Sc., L.R.C.P., M.R.C.S., D.C.H.
JENNIFER A. SORRELL, M.B., B.S.
HELEN B. SPINK, M.R.C.S., L.R.C.P. (Part-time)
TEISI URTSON, Med-Dip. (University of Tartu)
*P. WEYMAN, L.R.C.P., L.R.C.S., L.R.F.P. & S., D.P.H. (Part-time)
*C. G. WOOLGROVE, M.B., Ch.B., D.P.H.

*Also District Medical Officer of Health

DENTAL STAFF

Chief Dental Officer: H. E. GRAY, L.D.S.

Area Dental Officers: J. S. BENNETT, B.D.S.
EDITH M. HAGUE, L.D.S.

Dental Officers: T. BETTON, B.D.S.
PATRICIA M. CADDICK, B.D.S. (Part-time)
A. P. EATON, L.D.S.U. (Part-time)
IRENE M. KELLY, B.D.S. (Part-time)
S. L. MARKANDAY, L.D.S.
SUSAN MARY ROUT, B.D.S. (Part-time)
VIVIENNE B. SHUFF, B.D.S. (Part-time)
SHEILA D. WELBOURN, B.D.S. (Part-time)
R. C. WOOLGROVE, B.D.S.

Chesterfield Borough C. C. GRANT, L.D.S., Senior Dental Officer
W. F. O'DALY, L.D.S.

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